Telephone 650-506-5600

PTO/SB/80 (01-06)

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all prev 37 CFR 3.73(b).	ious powers of attorney gi	ven in the appl	cation identified in the	attached stater	nent under
I hereby appoint:					
Practitioners associat	ted with the Customer Number	:	51206		
OR		L			
Practitioner(s) named	below (if more than ten paten	t practitioners are	to be named, then a custor	ner number must	be used):
	Name F		Registration Name Number		Registration Number
		Ž			
		6			
		- 8			
Please change the correspo	endence address for the application	ation identified in t		er 37 CFR 3.73(b)	to:
The address assoc	lated with Customer Number:		51206		
Firm or Individual Name			AND		
		10	en e		
City		State	w	Zip	
Country					
Telephone			Email		
Assignee Name and Addres	s:		***************************************		
Hyperion Solutions Corporation					
500 Oracle Parkway					
	Redwood	l Shores,	California 9406	55-1677	
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled.					
SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee					

Title 60094602 v1

Signature

Name

Brady Mickelsen

Vice-President, Hyperion Solutions Corporation